

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	Dr	32	8/20
FORMALITY REVIEW	Dr	92	10/23/0
RESPONSE FORMALITY REVIEW	BZ	897	03-07-02

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
Final Original	
1	✓
2	✓
3	✓
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Claim	Date
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If more than 150 claims or 10 actions
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